



Commercial Drivers License  
555 Wright Way, Carson City  
810 E. Gregg St, Sparks, NV 89431  
4110 Donovan Way, N Las Vegas, NV 89030  
3505 Construction Way, Winnemucca, NV 89445  
3920 E. Idaho St, Elko, NV 89801  
178 N. Avenue F, Ely, NV 89301

## Non-Commercial Class A/B Third Party Certifier Application

NAC 483.186 to 483.197

### Part I – To be completed by Certifier (Driver)

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
Street City State Zip

Driver's License Number: \_\_\_\_\_ CDL Class: ☐ A ☐ B Endorsements: ☐ R ☐ J

Social Security No \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

***I certify under penalty of perjury that the information on this application is true and correct. I authorize the Department of Motor Vehicles to conduct any background investigation necessary to evaluate my driving, employment or credit history. I have read and will comply with the regulations and requirements for certification as a NCDL A/B Third Party Certifier.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Part II – To be completed by Approved Certifying Agency/Department

Agency/Department: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone Number: \_\_\_\_\_ Certification Number: \_\_\_\_\_

***I certify all statements made on this application are true. I attest the certifier (driver) named above has demonstrated ability to safely operate a Class A or B emergency vehicle. I understand any misstatement of facts may cause cancellation of my, or the agency/department's authority to certify driving ability.***

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_